Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 1 of 67

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Andrew	Katarzyna
	your government-issued picture identification (for	First name	First name
	example, your driver's	J	
	license or passport).	Middle name	 Middle name
	Bring your picture	Poole	Poole
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	 Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6135	xxx-xx-9728

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 2 of 67

Debtor 1 Andrew J Poole Debtor 2 Katarzyna Poole

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)		
	doing sacinose de names	EINs	EINs		
5.	Where you live	214 Liverpool Dr. SE Poplar Grove, IL 61065	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code Boone	Number, Street, City, State & ZIP Code		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 3 of 67

Debtor 1 Andrew J Poole

Del	otor 2 Katarzyna Poole				Case number (if known)	
Par	Tell the Court About	four Bankruptcy	Case			
7.	The chapter of the Bankruptcy Code you are	`		of each, see <i>Notice Required by</i> coage 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Ba e box.	nkruptcy
	choosing to file under	Chapter 7				
		☐ Chapter 11				
		☐ Chapter 12				
		☐ Chapter 13				
8.	How you will pay the fee	about how order. If y	v you may pay. Typid	cally, if you are paying the fee yo	x with the clerk's office in your local court for nurself, you may pay with cash, cashier's checlelf, your attorney may pay with a credit card or	k, or money
				Illments. If you choose this optio (Official Form 103A).	n, sign and attach the Application for Individua	als to Pay
		☐ I request but is not applies to	that my fee be waiv required to, waive your family size and	wed (You may request this option our fee, and may do so only if you d you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a pur income is less than 150% of the official povinstallments). If you choose this option, you rial Form 103B) and file it with your petition.	verty line that
9.	Have you filed for	■ No.				
	bankruptcy within the last 8 years?	☐ Yes.				
		Distr	ict	When	Case number	
		Distr		When	Case number	
		Distr	ict	When	Case number	
10.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		Debt	or		Relationship to you	
		Distr	ict	When	Case number, if known	
		Debt	or		Relationship to you	
		Distr	ict	When	Case number, if known	
11.	Do you rent your	■ No. Go	to line 12.			
	residence?	☐ Yes. Has	s your landlord obtain	ned an eviction judgment agains	you and do you want to stay in your residence	ce?
			No. Go to line 12	2.		
			Yes. Fill out <i>Initi</i> bankruptcy petit		ludgment Against You (Form 101A) and file it	with this

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 4 of 67

Deb	otor 2 Katarzyna Poole				Case number (if known)
Par	Report About Any Bu	sinesses	You Owr	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	siness
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation,			Name	e of business, if any	
	partnership, or LLC. If you have more than one sole proprietorship, use a		Numb	per, Street, City, Stat	te & ZIP Code
	separate sheet and attach it to this petition.		Chec	k the annronriate ho	ex to describe your business:
	it to this polition.				ness (as defined in 11 U.S.C. § 101(27A))
					Estate (as defined in 11 U.S.C. § 101(51B))
				•	efined in 11 U.S.C. § 101(53A))
				•	er (as defined in 11 U.S.C. § 101(6))
				None of the above	- ' ' '
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	deadline	s. If you ir is, cash-fl i.C. 1116 I am i	ndicate that you are low statement, and f (1)(B). not filing under Chapter illing under Chapter	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of rederal income tax return or if any of these documents do not exist, follow the procedure oter 11. 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
	3 · · · · · · · · · · · · · · · · · · ·				Number, Street, City, State & Zip Code

Andrew J Poole

Debtor 1

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 5 of 67

Debtor 1 Andrew J Poole
Debtor 2 Katarzyna Poole Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 6 of 67

	otor 2 Katarzyna Poole				Case nu	umber (if known)			
Par	t 6: Answer These Questi	ions for Re _l	porting Purposes						
16.	What kind of debts do you have?		Are your debts primarily consulution ndividual primarily for a personal,			defined in 11	U.S.C. § 101(8) as "incurred by an		
		I	☐ No. Go to line 16b.						
		I	■ Yes. Go to line 17.						
			Are your debts primarily busine money for a business or investme						
		1	☐ No. Go to line 16c.						
		I	☐ Yes. Go to line 17.						
		16c. :	State the type of debts you owe th	hat are not consume	er debts or bus	siness debts			
17.	Are you filing under Chapter 7?	□ No.	am not filing under Chapter 7. G	o to line 18.					
	Do you estimate that after any exempt property is excluded and administrative expenses	— 163.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				cluded and administrative expenses		
	are paid that funds will be available for		■ No □ Yes						
	distribution to unsecured creditors?								
18.	How many Creditors do you estimate that you	☐ 1-49		☐ 1,000-5,000			25,001-50,000		
	owe?	■ 50-99 □ 100-199		□ 5001-10,000 □ 10,001-25,000	1		50,001-100,000 More than100,000		
		☐ 200-999		— 10,001 20 ,000		_			
19.	How much do you estimate your assets to	\$0 - \$50		□ \$1,000,001 - \$			\$500,000,001 - \$1 billion		
	be worth?		1 - \$100,000 01 - \$500,000	□ \$10,000,001 - □ \$50,000,001 -			\$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion		
			01 - \$1 million	□ \$100,000,001			More than \$50 billion		
20.	How much do you estimate your liabilities	\$0 - \$50		□ \$1,000,001 - \$			\$500,000,001 - \$1 billion		
	to be?		1 - \$100,000 01 - \$500,000	□ \$10,000,001 - □ \$50,000,001 -			\$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion		
			01 - \$1 million	□ \$100,000,001		_	More than \$50 billion		
Par	t7: Sign Below								
For	you	I have exa	mined this petition, and I declare	under penalty of per	jury that the i	nformation pro	ovided is true and correct.		
			nosen to file under Chapter 7, I an tes Code. I understand the relief a						
			ey represents me and I did not pa I have obtained and read the not				ney to help me fill out this		
		I request re	elief in accordance with the chapte	er of title 11, United	States Code,	, specified in tl	nis petition.		
			nd making a false statement, cond case can result in fines up to \$29				y by fraud in connection with a poth. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ Andrew J			s/ Katarzyna				
		Signature			Katarzyna Po Signature of D				
		Executed of		E	xecuted on	August 4, 2			
			MM / DD / YYYY			MM / DD / Y	YYY		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 7 of 67

Debtor 1 Andrew J Poole	Document Page 7 of 67					
Debtor 2 Katarzyna Poole		Case number (if known)				
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	ed States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)			
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, schedules filed with the petition is incorrect.	, certify that I have no know	ledge after an inquiry that the information in the			
	/s/ William T. Cacciatore Jr.	Date	August 4, 2017			
	Signature of Attorney for Debtor		MM / DD / YYYY			
	William T. Cacciatore Jr.					
	Printed name					
	Eric Pratt Law Firm P.C. Firm name					
	5301 E. State St, Ste 116					
	Rockford, IL 61108					
	Number, Street, City, State & ZIP Code					
	Contact phone <u>815-315-0683</u>	Email address	rockford@jordanpratt.com			
	6244392					
	Bar number & State					

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main

		Docum	SIL TAUC O OF OT	
Fill in this infor	mation to identify your	case:		
Debtor 1	Andrew J Poole			
	First Name	Middle Name	Last Name	
Debtor 2	Katarzyna Poole			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				_ 0
(if known)				Check if this is ar amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		V	4-
		Your a	issets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)		
١.	1a. Copy line 55, Total real estate, from Schedule A/B	\$	100,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	23,100.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	123,100.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	159,199.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	85,742.00
	Your total liabilities	\$	244,941.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I)	¢	3,769.00
	Copy your combined monthly income from line 12 of Schedule I	Ψ	3,769.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,677.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes		
7.	What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main

		Document	Page 9 of 67	
	Andrew J Poole		3	
Debtor 2	Katarzyna Poole		Case number (if known)	

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

\$_____5,125.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	46,453.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	46,453.00

	Case 17-81831 [Doc 1 Filed 08/04/1 Document	17 Entered 08/04 Page 10 of 67	4/17 12:13:48	Desc	Main
Fill in this	information to identify your	case and this filing:				
Debtor 1	Andrew J Poole First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filir	Katarzyna Poole First Name	Middle Name	Last Name			
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS			
Case numb	ber					Check if this is an amended filing
_	I Form 106A/B	o mito e				
Sche	<u>dule A/B: Prop</u>	erty				12/15
think it fits b information. Answer ever	gory, separately list and describe best. Be as complete and accura If more space is needed, attach ry question.	te as possible. If two married pe a separate sheet to this form. On	ople are filing together, both n the top of any additional pa	are equally responsible	e for supply	ing correct
1. Do you o	wn or have any legal or equitable	interest in any residence, build	ing, land, or similar property	1?		
☐ No. Go	to Part 2.					
Yes. V	Where is the property?					
1.1		What is the prop	ortic? Cheek all that anniv			
214 L	Liverpool Dr. SE address, if available, or other description	Single-fam	erty? Check all that apply nily home multi-unit building ium or cooperative	the amount of any	secured clai	or exemptions. Put ms on Schedule D: ecured by Property.

■ Manufactured or mobile home Current value of the Current value of the Poplar Grove IL 61065-0000 ☐ Land entire property? portion you own? \$100,000.00 City ZIP Code \$100,000.00 State ■ Investment property ☐ Timeshare Describe the nature of your ownership interest □ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Fee simple ☐ Debtor 1 only Boone ☐ Debtor 2 only County ■ Debtor 1 and Debtor 2 only Check if this is community property lacksquare At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: per Zillow

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here.......>>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$100,000.00

Date		odse 17-8.		Document Page 11 c	of 67	2.13.48 DE	SC Maili
Debt Debt		Andrew J Pool Katarzyna Poo			Case numb	er (if known)	
3. C a	ars. vans	. trucks. tracto	rs. sport utility vel	hicles, motorcycles			
	,	,		•			
	No						
	Yes						
3.1	Make:	Nissan		Who has an interest in the property? Check			laims or exemptions. Put ed claims on Schedule D:
	Model:	Murano		☐ Debtor 1 only			ims Secured by Property.
	Year:	2014		Debtor 2 only	Curr	rent value of the	Current value of the
	Approxi	mate mileage:	53000	■ Debtor 1 and Debtor 2 only		re property?	portion you own?
	Other in	formation:		\square At least one of the debtors and another			
				Check if this is community property (see instructions)		\$20,000.00	\$20,000.00
				(see instructions)			
	No Yes						
				n for all of your entries from Part 2, inclu			\$20,000.00
Part	3: Descr	ibe Your Persona	al and Household Ite	ems			
Do y	ou own	or have any leç	gal or equitable int	terest in any of the following items?			Current value of the portion you own? Do not deduct secured
E	xamples: No	goods and fur Major appliance		, china, kitchenware			claims or exemptions.
	res. De	escribe					
			Older Household	furniture & personal belongings			\$2,000.00
		·				<u> </u>	
E	l No	Televisions and		eo, stereo, and digital equipment; computer ledia players, games	rs, printers, scann	ers; music collecti	ons; electronic devices
		F	T. O	Della de la companya		\neg	¢400.00
			IV, Computers, C	Cell phones, and other electronic device	ces		\$400.00
E	xamples:		gurines; paintings, s, memorabilia, col	prints, or other artwork; books, pictures, or llectibles	other art objects;	stamp, coin, or ba	seball card collections;
Е		for sports and Sports, photogr musical instrun	aphic, exercise, an	d other hobby equipment; bicycles, pool tal	bles, golf clubs, si	kis; canoes and ka	ayaks; carpentry tools;

Official Form 106A/B Schedule A/B: Property page 2

☐ Yes. Describe.....

	A	Document	Page 12 of 67		
Debtor 1 Debtor 2	Andrew J Poole Katarzyna Poole		Case numb	oer (if known)	
10. Firear <i>Exam</i> ■ No	ms ples: Pistols, rifles, shotguns, ammu	inition, and related equipmer	t		
☐ Yes.	Describe				
□ No	ples: Everyday clothes, furs, leather	coats, designer wear, shoes	, accessories		
■ Yes.	Describe				
	Necessary we	aring apparel			\$300.00
□ No	r y ples: Everyday jewelry, costume jew Describe	velry, engagement rings, wed	ding rings, heirloom jewelry, watch	hes, gems, gold, silver	
	Various Costu	me Jewelry and Wedding	Bands		\$200.00
	<u> </u>				
Exam ■ No □ Yes. 14. Any or ■ No	nrm animals ples: Dogs, cats, birds, horses Describe ther personal and household item Give specific information	ıs you did not already list, i	ncluding any health aids you diલ	d not list	
15 Add	the dollar value of all of your entr	ies from Part 3, including a	inv entries for nages you have a	attached	
	art 3. Write that number here				\$2,900.00
Port 4. Do	escribe Your Financial Assets				
	wn or have any legal or equitable	interest in any of the follow	ring?	portion y Do not de	value of the rou own? educt secured exemptions.
■ No	ples: Money you have in your walle			le your petition	
Exam	its of money ples: Checking, savings, or other fir institutions. If you have multip			, brokerage houses, and oth	ıer similar
□ No ■ Yes.		Institution	name:		
	17.1. Check	ing Chase Ba	ank		\$200.00
_Exam	s, mutual funds, or publicly tradeo ples: Bond funds, investment accou		ney market accounts		
■ No □ Yes.	Institutio	n or issuer name:			
	ublicly traded stock and interests enture	in incorporated and uninc	orporated businesses, including	g an interest in an LLC, pa	rtnership, and

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Page 13 of 67 Document Debtor 1 Andrew J Poole Debtor 2 Katarzyna Poole Case number (if known) ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) Through Employer Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information.....

Entered 08/04/17 12:13:48 Case 17-81831 Doc 1 Filed 08/04/17 Desc Main Document Page 14 of 67 Debtor 1 Andrew J Poole Debtor 2 Katarzyna Poole Case number (if known) 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Through Employer \$0.00 Spouse 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$200.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 15 of 67

Debtor 1 Andrew J Poole Debtor 2 Case number (if known) Katarzyna Poole List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$100,000.00 Part 2: Total vehicles, line 5 \$20,000.00 57. Part 3: Total personal and household items, line 15 \$2,900.00 Part 4: Total financial assets, line 36 \$200.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

Copy personal property total

\$23,100.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

61.

\$123,100.00

\$23,100.00

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main

		Documen	IL FAUCTO DI DI	
Fill in this infor	mation to identify your	case:		
Debtor 1	Andrew J Poole			
	First Name	Middle Name	Last Name	
Debtor 2	Katarzyna Poole			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT (OF ILLINOIS	
Case number				
(if known)				☐ Check if this is amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.
Older Household furniture & personal belongings	\$2,000.00	\$2,000.00 735 ILCS 5/12-1001(b)
Line from <i>Schedule A/B</i> : 6.1		□ 100% of fair market value, up to any applicable statutory limit
Tv, Computers, Cell phones, and other electronic devices	\$400.00	\$400.00 735 ILCS 5/12-1001(b)
Line from <i>Schedule A/B</i> : 7.1		□ 100% of fair market value, up to any applicable statutory limit
Necessary wearing apparel	\$300.00	\$300.00 735 ILCS 5/12-1001(a)
Line from Gonedate AVB. 11.1		☐ 100% of fair market value, up to any applicable statutory limit
Various Costume Jewelry and Wedding Bands	\$200.00	\$200.00 735 ILCS 5/12-1001(b)
Line from Schedule A/B: 12.1		☐ 100% of fair market value, up to any applicable statutory limit
Checking: Chase Bank Line from Schedule A/B: 17.1	\$200.00	\$200.00 735 ILCS 5/12-1001(b)
Line from Goriedate 7/B. 11.1		100% of fair market value, up to any applicable statutory limit

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 17 of 67

Debtor Debtor			Case number (if known)			
	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Check only one box for each exemption.			
	1(k): Through Employer e from <i>Schedule A/B</i> : 21.1	Unknown	■ 100% 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006		
	e you claiming a homestead exemption of ubject to adjustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered No	3 years after that for ca		,		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main

		Document Pao	<u>e 18 of 67</u>			
Fill in this informat	ion to identify you	ır case:				
Debtor 1	Andrew J Poole					
	First Name	Middle Name Last Na	me			
	Katarzyna Poole					
(Spouse if, filing)	First Name	Middle Name Last Na	me			
United States Bankr	uptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS				
Case number						
(if known)					☐ Check	if this is an
					amend	ed filing
Official Form 1	IOED					
			5			
Schedule D	: Creditors	Who Have Claims Secu	ired by Pr	operty	<u>y</u>	12/15
		If two married people are filing together, both out, number the entries, and attach it to this fo				
1. Do any creditors hav	e claims secured by	v vour property?				
	-	his form to the court with your other schedu	les. You have not	nina else to	o report on this form.	
_	of the information	•		g 0.00 t		
		below.				
<u> </u>	ecured Claims		. , Column A	l	Column B	Column C
		more than one secured claim, list the creditor seps a particular claim, list the other creditors in Part		nt of claim	Value of collateral	Unsecured portion If any
much as possible, list the	ne claims in alphabeti	cal order according to the creditor's name.	Do not de value of de		that supports this claim	
2.1 Pnc Bank		Describe the property that secures the claim		232.00	\$20,000.00	\$7,232.00
Creditor's Name		2014 Nissan Murano 53000 miles				
2730 Liberty	Λνο	As of the date you file, the claim is: Check all	hat			
Pittsburgh, P.		apply. Contingent				
Number, Street, City		☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage	or secured			
Debtor 2 only		car loan)				
Debtor 1 and Debto	=	☐ Statutory lien (such as tax lien, mechanic's	ien)			
☐ At least one of the o		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)				
community debt	relates to a	Unler (including a right to diset)				
	Opened					
	07/14 Last					
	Active	_				
Date debt was incurre	ed 4/21/17	Last 4 digits of account number	118	_		
						_
2.2 Wells Fargo I	Hm Mortgag	Describe the property that secures the claim		967.00	\$100,000.00	\$31,967.00
Oreallor 3 Name		214 Liverpool Dr. SE Poplar Grove, I 61065 Boone County	-			
		per Zillow				
Po Box 1033	5	As of the date you file, the claim is: Check all apply.	hat			
Des Moines,	IA 50306	☐ Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
NAME ALL STREET		Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		 An agreement you made (such as mortgage car loan) 	or secured			
■ Debtor 2 only	r 2 only	Statutory lien (such as tay lien, mechanic's	ion)			
	u z CHHV	L L STATUTORY HELD ISSUED AS 13Y HELD MECHANIC'S	(F) 11			

☐ Judgment lien from a lawsuit

☐ At least one of the debtors and another

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 19 of 67

Debtor 1	Andrew J F	Andrew J Poole			Case number (if know)	
	First Name	Middle Na	ame Last Name	•		
Debtor 2	Katarzyna	Poole				
	First Name	Middle Na	ame Last Name	•		
	if this claim re unity debt	elates to a	☐ Other (including a right to offset)			
Port Isla		Opened 02/07 Last Active		ner 7383		
Date debt	was incurred	4/13/17	Last 4 digits of account numb	er /303		
Add the	dollar value of	your entries in C	olumn A on this page. Write that numb	per here:	\$159,199.00	
If this is		of your form, add	the dollar value totals from all pages.		\$159,199.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main

		Document	Page 20 of 67	
Fill in this i	nformation to identify your o	case:		
Debtor 1	Andrew J Poole			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	Katarzyna Poole First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS	
Case number	er		-	Check if this is an amended filing
Official F	orm 106E/F			
		ho Have Unsecured	Claims	12/15
Schedule G: E Schedule D: C left. Attach the name and cas	Executory Contracts and Unexpi Creditors Who Have Claims Sect e Continuation Page to this pag e number (if known).	ired Leases (Official Form 106G). I ured by Property. If more space is e. If you have no information to re	list executory contracts on Schedule A/B: Property (Office Do not include any creditors with partially secured claim needed, copy the Part you need, fill it out, number the eleport in a Part, do not file that Part. On the top of any add	s that are listed in ntries in the boxes on the
	ist All of Your PRIORITY Un			
	reditors have priority unsecured	d claims against you?		
	o to Part 2.			
☐ Yes.				
	ist All of Your NONPRIORIT			
3. Do any c	reditors have nonpriority unsec	ured claims against you?		
☐ No. Y	ou have nothing to report in this pa	art. Submit this form to the court with	your other schedules.	
Yes.				
unsecure	d claim, list the creditor separately	for each claim. For each claim listed	ne creditor who holds each claim. If a creditor has more the d, identify what type of claim it is. Do not list claims already in have more than three nonpriority unsecured claims fill out the	ncluded in Part 1. If more
				Total claim
4.1 Adv	vance call center	Last 4 digits of acc	count number	\$0.00
	priority Creditor's Name (9091	When was the deb	t incurred?	
	nson City, TN 37615	As of the date you	file the eleien io. Observe II that are by	
	ber Street City State Zlp Code incurred the debt? Check one.	As of the date you	file, the claim is: Check all that apply	
	Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent		
_	Debtor 1 and Debtor 2 only	☐ Unliquidated		
	, ,	☐ Disputed Type of NONPRIOR	RITY unsecured claim:	
	At least one of the debtors and and Check if this claim is for a comm			
⊔ (debi		nunity — oncomination	ng out of a separation agreement or divorce that you did not	
ls th	e claim subject to offset?	report as priority clai		
	No	☐ Debts to pension	or profit-sharing plans, and other similar debts	
	es es	Other. Specify	notice	
		_		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 21 of 67

	or 1 Andrew J Poole or 2 Katarzyna Poole		Case number (if know)	
4.2	Alliance One	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 4850 Street Rd. Suite 300 Feasterville Trevose, PA 19053	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify COLLECTION	ON NOTICE	
4.3	AmeriCredit/GM Financial Nonpriority Creditor's Name	Last 4 digits of account number	7247	\$3,023.00
	Po Box 183853 Arlington, TX 76096	When was the debt incurred?	Opened 06/12 Last Active 9/23/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile		
4.4	Arlington Ridge Pathology Nonpriority Creditor's Name	Last 4 digits of account number		\$14.00
	520 E. 22nd St Lombard, IL 60148	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify medical		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 22 of 67

	r 2 Katarzyna Poole		Case number (if know)	
4.5	ARS National Services	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name Box 469046	When was the debt incurred?		
	Escondido, CA 92046 Number Street City State Zlp Code	As of the date you file, the claim	is: Cheek all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	<u></u>	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify notice		
4.6	Avant Credit, Inc Nonpriority Creditor's Name	Last 4 digits of account number	1610	\$0.00
	640 N La Salle St Suite 535	When was the debt incurred?	Opened 01/15 Last Active 2/23/16	
	Chicago, IL 60654 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,		
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify Unsecured		
4.7	Bank Of America	Last 4 digits of account number	8022	\$5,040.00
	Nonpriority Creditor's Name	_		
	Nc4-105-03-14 Po Box 26012	When was the debt incurred?	Opened 04/08 Last Active 3/09/16	
	Greensboro, NC 27410 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	• ,	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify Credit Card	<u> </u>	

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 23 of 67

	r 1 - Andrew J Poole r 2 - Katarzyna Poole		Case number (if know)	
	Tradazyna i eele			
4.8	Capital One	Last 4 digits of account number	5465	\$5,420.00
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 11/00 Last Active	
	Po Box 30253	When was the debt incurred?	3/07/16	
	Salt Lake City, UT 84130	_		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card		
4.9	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	4484	\$2,438.00
	Attn: Bankruptcy		Opened 12/07 Last Active	
	Po Box 30253	When was the debt incurred?	3/14/16	
	Salt Lake City, UT 84130 Number Street City State Zlp Code		er Charle all that and h	
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Occasion const		
	Debtor 2 only	☐ Contingent☐ Unliquidated		
	′	_ '		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	1 claim:	
	At least one of the debtors and another	Student loans	a olaini.	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify Credit Card		
4.1	Canital On a		7000	\$2,078.00
0	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	7888	Ψ2,076.00
	Attn: Bankruptcy		Opened 01/06 Last Active	
	Po Box 30253	When was the debt incurred?	3/23/16	
	Salt Lake City, UT 84130 Number Street City State Zlp Code		e. Charle all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	5. Спеск ан тасарру	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 24 of 67

Citibank North America	Last 4 digits of account number	7805	\$1,411.00
Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bankrup Po Box 790040	When was the debt incurred?	Opened 04/16 Last Active 10/11/16	
Saint Louis, MO 63179 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card		
Comenity Bank/Express Nonpriority Creditor's Name	Last 4 digits of account number	2888	\$0.00
Attn: Bankruptcy Po Box 182125	When was the debt incurred?	Opened 09/02 Last Active 6/29/13	
Columbus, OH 43218 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,		
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin		
Yes	Other. Specify Charge Acc	ount	
Comenity Bank/nwyrk&co Nonpriority Creditor's Name	Last 4 digits of account number	6679	\$0.00
220 W Schrock Rd Westerville, OH 43081	When was the debt incurred?	Opened 07/02 Last Active 2/10/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Student loans		
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin	,	

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 25 of 67

	or 1 Andrew J Poole or 2 Katarzyna Poole		Case number (if know)	
4.1 4	Commerce Bank Nonpriority Creditor's Name	Last 4 digits of account number	1306	\$2,548.00
	Attn: KC Rec -10 Po Box 419248 Kansas City, MO 64141	When was the debt incurred?	Opened 05/13 Last Active 3/07/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	□ Debtor 1 only ■ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	l claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card	g plans, and other similar debts	
4.1 5	Convergent Outsoucing, Inc	Last 4 digits of account number	3432	\$258.00
	Nonpriority Creditor's Name Po Box 9004 Renton, WA 98057 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	Opened 07/14 S: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent	о опоскан и ак арру	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not g plans, and other similar debts	
	Yes	■ Other. Specify Collection A	ttorney Comcast	
4.1 6	Credit adjustments Nonpriority Creditor's Name 330 Florence St Defiance, OH 43512 Number Street City State Zlp Code Who incurred the debt? Check one.	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	is: Check all that apply	\$0.00
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim:	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar debts	

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 26 of 67

	or 2 Katarzyna Poole		Case number (if know)		
4.1	EOS-CCA		1917	\$895.00	
7	Nonpriority Creditor's Name 700 Longwater Dr.	Last 4 digits of account number When was the debt incurred?	Opened 07/16	ψοθο.υυ	
	Norwell, MA 02061	_			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Collection A	ttorney Platte Valley Medical Ctr		
4.1 8	Fed Loan Serv	Last 4 digits of account number	0002	\$17,000.00	
	Nonpriority Creditor's Name		Opened 09/15 Last Active		
	Po Box 60610 Harrisburg, PA 17106	When was the debt incurred?	4/30/17		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	П			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:		
	At least one of the debtors and another	Student loans	- Julii		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	□ Yes	☐ Other. Specify	3,,		
	_ 163	Educational			
44					
4.1 9	Fivenson Dermatology	Last 4 digits of account number		\$60.00	
	Nonpriority Creditor's Name Attn #14626R Box 14000	When was the debt incurred?			
	Belfast, ME 04915				
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed	d alaim.		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a Giann:		
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify medical			

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 27 of 67

Debtor 1 Debtor 2	Andrew J Poole Katarzyna Poole		Case number (if know)	
4.2	ireshview	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 6300 S. Syracuse	When was the debt incurred?		
ī	Englewood, CO 80111 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
I	Debtor 1 only	☐ Contingent		
1	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
1	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify notice		
	Great American Finance Nonpriority Creditor's Name	Last 4 digits of account number	9346	\$0.00
:	Attn: Bankruptcy 20 N Wacker Dr. Suite 2275 Chicago, IL 60606	When was the debt incurred?	Opened 05/14 Last Active 12/04/15	
Ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
I	Debtor 1 only	☐ Contingent		
ļ	Debtor 2 only	☐ Unliquidated		
ļ	Debtor 1 and Debtor 2 only	☐ Disputed		
!	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
I	No	Debts to pension or profit-sharing	g plans, and other similar debts	
1	Yes	Other. Specify Household	Goods	
	Hsbc Bank Usa, Na	Last 4 digits of account number	4945	\$0.00
1	Po Box 2013 Buffalo, NY 14240	When was the debt incurred?	Opened 11/01 Last Active 9/25/08	
ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
1	Debtor 1 only	☐ Contingent		
I	Debtor 2 only	☐ Unliquidated		
1	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
I	Yes	Other. Specify Credit Card		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 28 of 67

Debt	or 2 Katarzyna Poole	Case number (if know)	
4.2 3	Joseph Mann & Creed	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Box 1270 Twinsburg, OH 44087	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice	
4.2 4	LAKSHORE GASTROENTEROLOGY	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name PO BOX 14905 Chicago, IL 60614	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.2	LDC Collections System	Last 4 digits of account number	\$0.00
5	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ0.00
	PO Box 7684	When was the debt incurred?	
	San Francisco, CA 94120 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The of the date you me, the chain is: chook an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify notice	
		1 7	

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 29 of 67

	or 1 Andrew J Poole or 2 Katarzyna Poole		Case number (if know)	
4.2 6	Lending Club Corp Nonpriority Creditor's Name	Last 4 digits of account number	4899	\$0.00
	71 Stevenson St Suite 300 San Francisco, CA 94105	When was the debt incurred?	Opened 12/12 Last Active 12/28/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecure ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	ng plans, and other similar debts	
4.2 7	medco financial Nonpriority Creditor's Name	Last 4 digits of account number		\$110.00
	Box 525 Gurnee, IL 60031 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	on once all and opply	
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify medical		
4.2 8	Medical Recovery	Last 4 digits of account number		\$165.00
	Nonpriority Creditor's Name 2250 E. Devon Ave Suite 352 Des Plaines, IL 60018	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify medical	31 11 1, 2012 2010	
	□ 163	Otner. Specify		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 30 of 67

	Andrew J Poole Katarzyna Poole		Case number (if know)	
4.2 9	Merchants Credit	Last 4 digits of account number	4092	\$506.00
	Nonpriority Creditor's Name 223 W Jackson Blvd Ste 700 Chicago, IL 60606	When was the debt incurred?	Opened 05/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Collection A Gynecolo	attorney Parkside Obstetrics	
4.3 0	meyer & njus	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 1100 US Bank Plaza 200 South Sixth St Minneapolis, MN 55402	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify notice		
4.3	Midwest Recovery Syste	Last 4 digits of account number	2833	\$840.00
	Nonpriority Creditor's Name Po Box 899 Florissant, MO 63032	When was the debt incurred?	Opened 09/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	■ Other Specify Collection A	attorney Jd Marketing	

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 31 of 67

Debto			Case number (if know)	
.3	Miramed Revenue Group	Last 4 digits of account number	2163	\$0.00
	Nonpriority Creditor's Name 991 Oak Creek Dr Lombard, IL 60148	When was the debt incurred?	Opened 3/05/13 Last Active 7/24/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Northwest C	•	
.3	Monterey Financial Svc Nonpriority Creditor's Name	Last 4 digits of account number	0089	\$0.00
	4095 Avenida De La Plata Oceanside, CA 92056	When was the debt incurred?	Opened 04/13 Last Active 6/28/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	☐ Yes	Other. Specify Unsecured	g pians, and other similar debts	
.3	municipal Services	Last 4 digits of account number		\$200.00
	Nonpriority Creditor's Name Box 16755 Austin, TX 78761	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other Specify Services		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 32 of 67

ebtor 2 Katarzyna Poole		Case number (if know)	
Mutual Management Serv	Last 4 digits of account number	2578	\$226.00
Nonpriority Creditor's Name 7177 Crimson Ridge Dr St Rockford, IL 61107	When was the debt incurred?	Opened 05/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Collection A Physicians	ttorney Northwest Suburban	
Navient Navient	Last 4 digits of account number	2253	\$14,226.00
Nonpriority Creditor's Name Attn: Claims Dept Po Box 9500	When was the debt incurred?	Opened 08/13 Last Active 5/02/17	
Wilkes- Barr, PA 18773 Number Street City State Zlp Code	As of the date you file, the claim i	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан тат арру	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	☐ Other. Specify		
	Educational		
3 NOO Business Comisses			# 0.00
NCC Business Services Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
Box 24739 Jacksonville, FL 32241	When was the debt incurred?		
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify notice		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 33 of 67

Debto	r 2 Katarzyna Poole		Case number (if know)	
4.3	NES of Ohio	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 2479 Erdison Blvd Unit A Twinsburg, OH 44087	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify notice		
4.3	Negatives at Outrode on Diversities			Ф00 г 00
9	Northwest Suburban Physicians Nonpriority Creditor's Name	Last 4 digits of account number		\$325.00
	5999 New Wilke Rd Suite 200 Bldg 2 Rolling Meadows, IL 60008	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	Student loans	diami.	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify medical		
1.4	NTD/ODOD		0040	#0.00
)	NTB/CBSD Nonpriority Creditor's Name	Last 4 digits of account number	8813	\$0.00
	CitiCards Private Label Centralized Bank	When was the debt incurred?	Opened 3/03/09 Last Active 4/29/11	
	Po Box 790040			
	Saint Louis, MO 63179 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,	and apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acc	ount	

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 34 of 67

	or 2 Katarzyna Poole		Case number (if know)	
4.4 1	OneMain	Last 4 digits of account number	0493	\$7,048.00
,	Nonpriority Creditor's Name	_	Opened 07/15 Last Active	
	Attn: Bankruptcy 601 Nw 2nd St	When was the debt incurred?	Opened 07/15 Last Active 12/08/15	
	Evansville, IN 47708		12,00,10	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other Specify Note Loan		
	Li res	Other. Specify Note Loan		
4.4	parkside obstetrics	Lock A dimite of account number		\$500.00
2	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ300.00
	1875 Dempster St Suite 465 Park Ridge, IL 60068	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify medical		
4.4				
3	procressive ins	Last 4 digits of account number		\$50.00
	Nonpriority Creditor's Name Dept 0586	When was the debt incurred?		
	Carol Stream, IL 60132 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	• •		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		Student loans		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	adion agreement of divolce that you did flot	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify fees		
		Outlot. Opcolly		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 35 of 67

Debtor 1 Andrew J Poole

ebtor 2 Katarzyna Poole	Case number (if know)	Case number (if know)		
promedica	Last 4 digits of account number	\$305.00		
Nonpriority Creditor's Name Attn # 11043	When was the debt incurred?			
BOx 14000 Belfast, ME 04915				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify medical			
Receivables Outsouring	Last 4 digits of account number	\$0.00		
Nonpriority Creditor's Name		*		
Box 62850	When was the debt incurred?			
Baltimore, MD 21264 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	As of the date you file, the claim is. Check all that apply			
Debtor 1 only				
Debtor 2 only	Contingent			
<u> </u>	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured claim:			
	Student loans			
	_ ****			
	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	Debts to pension or profit-sharing plans, and other similar debts			
☐ Yes	■ Other. Specifynotice			
RMCB		\$0.00		
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ0.0		
Box 1235	When was the debt incurred?			
Elmsford, NY 10523 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify notice			

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 36 of 67

Debtor 2 Katarzyna Poole		Case number (if know)			
1.4	State Collections	Last 4 digits of account number		\$0.00	
	Nonpriority Creditor's Name Box 6250	When was the debt incurred?			
	Madison, WI 53716 Number Street City State Zlp Code				
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
Debtor 2 only Debtor 1 and Debtor 2 only		☐ Unliquidated ☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
		☐ Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify notice			
	☐ Yes				
4.4 3	Synchrony Bank/ JC Penneys Nonpriority Creditor's Name	Last 4 digits of account number	7637	\$3,290.00	
	Attn: Bankruptcy		Opened 04/14 Last Active		
	Po Box 956060	When was the debt incurred?	4/14/16		
	Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim			
	Who incurred the debt? Check one.	As of the date you file, the claim			
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	_ `			
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure			
	_	☐ Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No		Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes				
1.4 9	Synchrony Bank/TJX Nonpriority Creditor's Name	Last 4 digits of account number	6835	\$2,357.00	
	Attn: Bankruptcy Po Box 956060	When was the debt incurred?	Opened 12/12 Last Active 3/06/16		
	Orlando, FL 32896				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim			
	Debtor 1 only				
	Debtor 2 only	☐ Contingent			
	,	Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure			
	☐ At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes	■ Other. Specify Credit Card			
	_ 103	Other. Specify Ordan Sard			

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 37 of 67

	tor 2 Katarzyna Poole Katarzyna Poole		Case number (if know)	
4.5 0	The Toledo Clinic	Last 4 digits of account number		\$16.00
	Nonpriority Creditor's Name Box 8708 Toledo, OH 43623	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify medical		
4.5 1	Uas/college Ave Studen Nonpriority Creditor's Name	Last 4 digits of account number	4898	\$15,227.00
	1105 N Market St Wilmington, DE 19801	When was the debt incurred?	Opened 09/15 Last Active 5/01/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify		
	1	Educational		
4.5 2	University of Wis Med Foundation	Last 4 digits of account number		\$40.00
	Nonpriority Creditor's Name Box 2978	When was the debt incurred?		
	Milwaukee, WI 53201 Number Street City State Zlp Code	As of the date you file, the claim i	e. Chock all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim i	s. Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other Specify medical		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 38 of 67

2 Katarzyna Poole	Case number (if know)				
university of Ws	Last 4 digits of account number	\$26.00			
Nonpriority Creditor's Name Box 3006	When was the debt incurred?				
Milwaukee, WI 53201 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify medical				

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					_
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Fotal Claim 46,453.00
Total claims					.0, .00.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	39,289.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	85,742.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main

		Dodaine	1 446 65 61 61
Fill in this info	rmation to identify your	case:	
Debtor 1	Andrew J Poole First Name	Middle Name	Last Name
Debtor 2	Katarzyna Poole		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS
Case number			
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	•				
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main

		Docume	ent Page 40 d	of 67	
Fill in this	information to identify your	case:			
Debtor 1	Andrew J Poole				
	First Name	Middle Name	Last Name		
Debtor 2	Katarzyna Poole				
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	hor				
(if known)				☐ Check if this is an	
				amended filing	
~ ((; · · ·)	1.5				
	I Form 106H				
Sched	lule H: Your Cod	ebtors		12/15	
■ No □ Yes 2. With Arizon: ■ No. □ Yes	hin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. s. Did your spouse, former spou	I lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live	operty state or territor erto Rico, Texas, Wash with you at the time?	ry? (Community property states and territories include ington, and Wisconsin.)	
in line Form out Co	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	rif your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the debt	ial fill
١	Name, Number, Street, City, State and ZI	P Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
7	Number Street			_	
(City	State	ZIP Code		
					_
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
=	Number Street			_	
	City	State	ZIP Code		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 41 of 67

	in this information to identify your									
Dei	otor 1 Andrew J F	'00le				_				
	otor 2 Katarzyna use, if filing)	Poole				_				
Uni	ted States Bankruptcy Court for the	ne: NORTHERN DISTRIC	CT OF ILL	INOIS		_				
Cas	se number						Check if this is:	<u>.</u>		
(If kr	nown)						☐ An amende			
_									ving postpetition of following date:	chapter
0	fficial Form 106I						MM / DD/ Y	YYYY		
S	chedule I: Your Inc	come								12/15
spo atta	plying correct information. If you use. If you are separated and you has separate sheet to this form Describe Employment	our spouse is not filing w n. On the top of any additi	ith you, c	lo not includ	e inforr	natio	on about your spo	ouse. If r	more space is n	eeded,
1.	Fill in your employment information.		Debto	r 1			Debtor 2	2 or non	-filing spouse	
	If you have more than one job,	Employment status	■ Em	■ Employed			■ Empl	■ Employed		
	attach a separate page with information about additional employers.	Employment status	☐ Not	☐ Not employed				☐ Not employed		
		Occupation					sales su	upport		
	Include part-time, seasonal, or self-employed work.	Employer's name	Mercy	Health			Stericyc	cle		
	Occupation may include studen or homemaker, if it applies.	t Employer's address								
		How long employed t	here?	2 months	5			years		
Par	t 2: Give Details About M	onthly Income								
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have	nothing to rep	oort for	any I	ine, write \$0 in the	space. I	Include your non	-filing
	u or your non-filing spouse have it espace, attach a separate sheet		ombine th	e information	for all e	emplo	yers for that perso	on on the	e lines below. If y	ou need
							For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly				2.	\$	1,076.00	\$	4,008.00	
3.	Estimate and list monthly over	rtime pay.			3.	+\$	0.00	+\$_	0.00	

1,076.00

4,008.00

Calculate gross Income. Add line 2 + line 3.

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 42 of 67

	tor 1 tor 2	Andrew J Poole Katarzyna Poole	_	(Case	number (if known)					
					For	Debtor 1		or Debtor	spouse		
	Cop	by line 4 here	4.		\$_	1,076.00	\$_	4	,008.00	0_	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ā.	\$	160.00	\$		550.00	0	
	5b.	Mandatory contributions for retirement plans	5b).	\$	0.00	\$		0.00	0	
	5c.	Voluntary contributions for retirement plans	50) .	\$	0.00	\$		195.00	0	
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	\$		82.00	0	
	5e.	Insurance	5e		\$	0.00	\$		328.00	0	
	5f.	Domestic support obligations	5f.		\$_	0.00	\$_		0.00		
	5g.	Union dues	5g		\$_	0.00	\$_		0.00	_	
	5h.	Other deductions. Specify:	5h	1.+	\$_	0.00	+ \$		0.00	0_	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	160.00	\$_	1	,155.00	0_	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	916.00	\$_	2	,853.00	0_	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$	0.00	\$		0.00	Λ	
	8b.	Interest and dividends	8b		\$	0.00	\$		0.00	_	
	8c.	Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	t 80) .	\$	0.00	\$		0.00	0	
	8d.	Unemployment compensation	80	d.	\$	0.00	\$		0.00	_	
	8e.	Social Security	86	€.	\$	0.00	\$		0.00	0	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$_	0.00	\$_		0.00	_	
	8g.	Pension or retirement income	98]. 1.+	\$ \$	0.00	\$		0.00		
	8h.	Other monthly income. Specify:	— ^{OI}	1.+	^Ф -	0.00	+ ⊅_		0.00	<u>U</u>	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	0.00	\$_		0.0	00	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		916.00 + \$	2	2,853.00	= \$	3.7	69.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ť –		310.00		,000.00	-	0,7	55.00
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	r depe					Schedule	e J. +\$		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certailies							\$	3,7	69.00
13.	Do	you expect an increase or decrease within the year after you file this forn	n?						Comb	ined nly inc	ome
		No. Yes. Explain:									

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 43 of 67

Fill	in this informa	ation to identify yo	our case:					
Deb	otor 1	Andrew J Poo	ole				c if this is:	
	otor 2 ouse, if filing)	Katarzyna Po	oole					ving postpetition chapter the following date:
Unit	ted States Bank	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS	<u> </u>	MM / DD / YYYY	
1	se number nown)							
0	fficial Fo	rm 106J						
		J: Your	Exner	1686				12/15
Be	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this				or supplying correct
Par		ribe Your House	hold					
1.	Is this a join ☐ No. Go to	o line 2.	in a sanar	ate household?				
			iii a sepai	ate nousenoiu:				
	■ N		st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debto	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter		1	□ No ■ Yes
					Son		3	□ No ■ Yes
								□ No
								☐ Yes
								□ No □ Yes
3.	,	penses include		No	-		· · · · · · · · · · · · · · · · · · ·	— 163
		of people other the digital of the d	han \square	Yes				
Est	imate your e	a date after the l	our bankr	ly Expenses uptcy filing date unless y cy is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on Schedule I: \			Your exp	enses
4.		or home owners		nses for your residence. I	nclude first mortgage	e 4. \$		1,060.00
		ded in line 4:	-					
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner's	s, or renter	's insurance		4a. \$		0.00
	4c. Home	maintenance, re	pair, and u	upkeep expenses		4c. \$		0.00
_		owner's associat				4d. \$		0.00
5.	Additional i	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 44 of 67

Debtor 1	Andrew	J Poole			
ebtor 2	2 Katarzyı	na Poole	Case num	ber (if known)	
	lities:			_	
6a.		y, heat, natural gas	6a.	\$	250.00
6b.		ewer, garbage collection	6b.	\$	100.00
6c.		ne, cell phone, Internet, satellite, and cable services	6c.	·	200.00
6d.		•	6d.		0.00
		sekeeping supplies	7.	\$	600.00
_		children's education costs	8.	\$	0.00
Clo	othing, laun	dry, and dry cleaning	9.	\$	100.00
		products and services	10.	\$	100.00
Me	dical and de	ental expenses	11.	\$	200.00
		 Include gas, maintenance, bus or train fare. 	40	Φ.	300.00
		car payments.	12.	·	
		, clubs, recreation, newspapers, magazines, and books	13.	·	100.00
		tributions and religious donations	14.	\$	0.00
	urance.				
	not include i a. Life insur	insurance deducted from your pay or included in lines 4 or 20.	150	¢.	2.22
			15a.	·	0.00
	o. Health in		15b.		0.00
	c. Vehicle ii		15c.	·	100.00
		surance. Specify:	15d.	\$	0.00
		include taxes deducted from your pay or included in lines 4 or 20		•	
	ecify:		16.	\$	0.00
		lease payments:	17a.	¢.	567.00
		nents for Vehicle 1		·	567.00
	. ,	nents for Vehicle 2	17b.	·	0.00
	c. Other. Sp		17c.	*	0.00
	d. Other. Sp	•	17d.	\$	0.00
		s of alimony, maintenance, and support that you did not rep		\$	0.00
		n your pay on line 5, <i>Schedule I, Your Income</i> (Official Form ' ts you make to support others who do not live with you.	1061).	\$	
	ecify:	is you make to support others who do not live with you.	19.	Ψ	0.00
	,	perty expenses not included in lines 4 or 5 of this form or on		our Income	
		es on other property	20a.		0.00
	o. Real esta		20b.	· -	0.00
		, homeowner's, or renter's insurance	20c.	·	0.00
		ance, repair, and upkeep expenses	20d.		0.00
		ner's association or condominium dues	20d. 20e.	· -	-
					0.00
. Oth	ner: Specify:	·	21.	+\$	0.00
. Cal	lculate your	monthly expenses			
228	a. Add lines	4 through 21.		\$	3,677.00
22t	o. Copy line	22 (monthly expenses for Debtor 2), if any, from Official Form 10	6J-2	\$	
		2a and 22b. The result is your monthly expenses.		\$	3,677.00
220	5. Add line 22	za ana 22b. The result is your monthly expenses.		Ψ	3,077.00
		monthly net income.			
23a	a. Copy line	e 12 (your combined monthly income) from Schedule I.	23a.	\$	3,769.00
23b	o. Copy you	ur monthly expenses from line 22c above.	23b.	-\$	3,677.00
					·
230	c. Subtract	your monthly expenses from your monthly income.			20.00
		It is your monthly net income.	23c.	\$	92.00
		an increase or decrease in your expenses within the year a			
		you expect to finish paying for your car loan within the year or do you expe e terms of your mortgage?	ect your mortgage	payment to increas	se or decrease because of a
_		e terms or your mortgage?			
	No.				
	Yes.	Explain here:			

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 45 of 67

Fill in this infor	mation to identify your	case:		
Debtor 1	Andrew J Poole]
	First Name	Middle Name	Last Name	
Debtor 2	Katarzyna Poole			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing
Official For	-	امرياد المارية	Debterie Cabadulas	
Declarat	don About a	ın individuai	Debtor's Schedules	12/15
You must file th	is form whenever you fi	le bankruptcy schedules	nsible for supplying correct information. s or amended schedules. Making a false st	
•	y or property by fraud in 8 U.S.C. §§ 152, 1341, 1		kruptcy case can result in fines up to \$250,	000, or imprisonment for up to 20

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No	
Yes. Name of person	

Attach Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X	/s/ Andrew J Poole	
	Andrew J Poole	
	Signature of Debtor 1	
	Date August 4, 2017	

X /s/ Katarzyna Poole
Katarzyna Poole
Signature of Debtor 2

Date August 4, 2017

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 46 of 67

FIII	in this inforn	nation to identify you	r case:			
Del	otor 1	Andrew J Poole First Name	Middle Nosse	Lost Nome		
Del	otor 2	Katarzyna Poole	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	iou Ciaioo Bai	mapley Countries and	- NORTHER BIOTHOR	OF ILLINOIS		
	se number				-	heck if this is an mended filing
∩f	ficial Fo	rm 107				
			Affairs for Indivi	duals Filing for E	Bankruptcy	4/16
info nun	rmation. If m	ore space is needed, n). Answer every que	attach a separate sheet to	this form. On the top of an	equally responsible for sup y additional pages, write you	
1.	<u> </u>	current marital statu		a Elvea Belole		
	MarriedNot mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	_		•	•		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do r	not include where you live nov	v.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
3. state					nity property state or territory ico, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ke sure you fill out Scl	nedule H: Your Codebtors (C	Official Form 106H).		
Pai	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the total	al amount of income yo	u received from all jobs and	ng a business during this y all businesses, including part ve together, list it only once u		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,000.00	■ Wages, commissions, bonuses, tips	\$16,000.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 47 of 67

	Debtor 2 Katarzyna Poole Katarzyna Poole			Ca	Case number (if known)			
				Debtor 1		Debtor 2		
			:	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of ind Check all that a		Gross income (before deductions and exclusions)
	last calen nuary 1 to	dar year: December :		Wages, commissions, conuses, tips	\$44,671.00	■ Wages, combonuses, tips	imissions,	\$0.00
			I	☐ Operating a business		☐ Operating a	business	
		dar year bef December 3	24 2045 \	Wages, commissions, conuses, tips	\$48,098.00	☐ Wages, combonuses, tips	ımissions,	\$0.00
			I	☐ Operating a business		☐ Operating a	business	
	■ No	source and the source	J	e from each source separat	ely. Do not include income	e that you listed in lir	ne 4.	
	☐ Yes.	Fill in the de	tails.					
			S	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3: List	Certain Pa	yments You M	ade Before You Filed for I	Bankruptcy			
6.	Are either ☐ No.	Neither De	btor 1 nor Del rimarily for a po 90 days before Go to line 7. List below eac	debts primarily consumer otor 2 has primarily consu- ersonal, family, or househol you filed for bankruptcy, die ch creditor to whom you pair	mer debts. Consumer de d purpose." d you pay any creditor a to d a total of \$6,425* or more	tal of \$6,425* or mo e in one or more pay	re? vments and tl	he total amount you
		* Subject t	not include pa	itor. Do not include paymen ayments to an attorney for th n 4/01/19 and every 3 years	nis bankruptcy case.		• • •	•
	Yes.			ooth have primarily consu you filed for bankruptcy, did		tal of \$600 or more?	•	
		No.	Go to line 7.	Go to line 7.				
		□ Yes	include payme	ch creditor to whom you paidents for domestic support ob is bankruptcy case.				
	Creditor's	s Name and	Address	Dates of payme		Amount you	Was this p	payment for
					paid	still owe		

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 48 of 67

Debtor 1 Andrew J Poole

Debt	tor 2 Katarzyna Poole		Cas	e number (if known)		
(Within 1 year before you filed for bankrul Insiders include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony.	partners; relatives of any ger in control, or owner of 20% of	neral partners; partne or more of their voting	rships of which yo g securities; and a	ou are a genera ny managing ag	I partner; corporations gent, including one fo
	■ No □ Yes. List all payments to an insider.					
	☐ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
i	Within 1 year before you filed for bankru insider? Include payments on debts guaranteed or c		ments or transfer a	ny property on a	ccount of a de	ebt that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	this payment tor's name
Part	4: Identify Legal Actions, Repossessi	ons, and Foreclosures	•			
- 1	Within 1 year before you filed for bankru, List all such matters, including personal inju modifications, and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
	Within 1 year before you filed for bankru Check all that apply and fill in the details be		erty repossessed, fo	oreclosed, garnis	shed, attached	, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property Explain what happene	a	Date		Value of the property
	Within 90 days before you filed for bankr accounts or refuse to make a payment be	uptcy, did any creditor, inc		ancial institution	ı, set off any a	mounts from your
	Yes. Fill in the details. Creditor Name and Address	Describe the action the	e creditor took		action was	Amount
	Within 1 year before you filed for bankru court-appointed receiver, a custodian, or		erty in the possessi	taker		fit of creditors, a
ı	☐ Yes					
Part	List Certain Gifts and Contribution	s				
	Within 2 years before you filed for bankro ■ No □ Yes. Fill in the details for each gift.	uptcy, did you give any gift	s with a total value	of more than \$60	0 per person?	
	Gifts with a total value of more than \$60 per person	0 Describe the gifts		Date: the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Page 49 of 67 Document Debtor 1 Andrew J Poole Debtor 2 Katarzyna Poole Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Value of property Describe the property you lost and Describe any insurance coverage for the loss Date of your how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Eric Pratt Law Firm P.C. Attorney Fees \$1,885.00 5301 E. State St, Ste 116 Rockford, IL 61108 rockford@jordanpratt.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

П Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 50 of 67

Debtor 1 Andrew J Poole Debtor 2 Katarzyna Poole

Case number (if known)

19.	 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No 						
	☐ Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty tran	sferred	Date Transfe made	er was
Par	t 8: List of Certain Financial Accounts, Instru	ıments, Safe Deposit	Boxes, and S	torage Uni	ts		
20.	Within 1 year before you filed for bankruptcy, we sold, moved, or transferred? Include checking, savings, money market, or or houses, pension funds, cooperatives, associate	ther financial accour	nts; certificate:	s of depos	•		
	■ No □ Yes. Fill in the details.						
		ast 4 digits of ecount number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	Last ba before clos tra	
21.	21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables?				ities,		
	■ No						
	☐ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you sti have it?	ill
22.	Have you stored property in a storage unit or p	lace other than your	home within 1	year befo	re you filed for bankrup	tcy?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility	Who else has or h	ad access	Describe	the contents	Do you sti	ill
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, S State and ZIP Code)		Describe	the contents	have it?	
Par	t 9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that some for someone.	one else owns? Inclu	ude any prope	ty you bor	rowed from, are storing	ງ for, or hold in t	rust
	■ No						
	Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property		Value
Par	t 10: Give Details About Environmental Inform	ation					
	the purpose of Part 10, the following definitions						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface	water, ground	• .	•		ous or
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	defined under any e		law, wheth	ner you now own, opera	te, or utilize it o	r used
	to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,						

Official Form 107

hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 51 of 67

Debtor 1 Andrew J Poole Debtor 2 Katarzyna Poole

Case number (if known)

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of an	y release of hazardous material?				
	NoYes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admin	istrative proceeding under any envi	ronmental law? Include settlements a	and orders.		
	NoYes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	111: Give Details About Your Business or Co	nnections to Any Business				
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have an	y of the following connections to any	business?		
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time			
	☐ A member of a limited liability compan	a limited liability company (LLC) or limited liability partnership (LLP)				
	☐ A partner in a partnership					
	☐ An officer, director, or managing execu	utive of a corporation				
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation				
	■ No. None of the above applies. Go to Par	t 12.				
	☐ Yes. Check all that apply above and fill in	the details below for each business				
	Business Name D Address	escribe the nature of the business	Employer Identification number Do not include Social Security			
		ame of accountant or bookkeeper	Dates business existed	number of frint.		
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business institutions, creditors, or other parties.				ude all financial		
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued				
	,,,					

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 52 of 67

Debtor 1 Andrew J Poole	ğ	
Debtor 2 Katarzyna Poole		Case number (if known)
Part 12: Sign Below		
I have read the answers on this Statement of Fi	inancial Affairs and any attachments.	and I declare under penalty of perjury that the answers
are true and correct. I understand that making a	a false statement, concealing property	, or obtaining money or property by fraud in connection
with a bankruptcy case can result in fines up to 18 U.S.C. §§ 152, 1341, 1519, and 3571.	\$250,000, or imprisonment for up to	20 years, or both.
10 0.3.6. gg 132, 1341, 1313, and 3371.		
/s/ Andrew J Poole	/s/ Katarzyna Poole	
Andrew J Poole	Katarzyna Poole	
Signature of Debtor 1	Signature of Debtor 2	
Date August 4, 2017	Date August 4, 2017	
Did you attach additional pages to Your Statem	ent of Financial Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?
■ No		
□Yes		
Did you pay or agree to pay someone who is no	ot an attorney to help you fill out hank	ruptey forms?
■ No	or an accome you mile account	rapidy forms.
_ `	uptcy Petition Preparer's Notice, Declara	tion, and Signature (Official Form 119).

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 53 of 67

Fill in this infor	mation to identify your	case:		
Debtor 1	Andrew J Poole			
	First Name	Middle Name	Last Name	
Debtor 2	Katarzyna Poole			
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is a amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
☐ Surrender the property.	□ No
☐ Retain the property and redeem it.	
Retain the property and enter into a Reaffirmation Agreement.	Yes
☐ Retain the property and [explain]:	
☐ Surrender the property.	□ No
☐ Retain the property and redeem it.	_
Retain the property and enter into a Reaffirmation Agreement.	■ Yes
☐ Retain the property and [explain]:	
	Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement.

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 54 of 67

Debtor 1 Debtor 2		Case number (if known)
Lessor's	nomo	
	iname. ion of leased	□ No
Property		☐ Yes
Lessor's		□ No
Property	ion of leased /:	☐ Yes
Lessor's		□ No
Property	ion of leased /:	☐ Yes
Lessor's		□ No
Description of leased Property:		☐ Yes
Lessor's		□ No
Property	ion of leased /:	☐ Yes
Lessor's		□ No
Property	ion of leased /:	☐ Yes
Lessor's		□ No
Property	ion of leased /:	☐ Yes
Part 3:	Sign Below	
Under pe	enalty of perjury, I declare that I have indicat that is subject to an unexpired lease.	ed my intention about any property of my estate that secures a debt and any personal
	Andrew J Poole	X /s/ Katarzyna Poole
	drew J Poole	Katarzyna Poole
Sig	nature of Debtor 1	Signature of Debtor 2
Dat	te August 4, 2017	Date August 4, 2017

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chap	ter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 59 of 67

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In	ro	Andrew J Poole		Case No.			
111	16	Katarzyna Poole	Debtor(s)	Chapter	7		
		DISCLOSURE OF COMPENSATI	ON OF ATTOR	NEY FOR DI	EBTOR(S)		
1.	COI	rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cert mpensation paid to me within one year before the filing of the prendered on behalf of the debtor(s) in contemplation of or in contemplation.	to me, for services rendered or to				
		For legal services, I have agreed to accept		\$	1,885.00		
		Prior to the filing of this statement I have received			1,885.00		
		Balance Due		\$	0.00		
2.	\$_	335.00 of the filing fee has been paid.					
3.	Th	e source of the compensation paid to me was:					
		■ Debtor □ Other (specify):					
4.	Th	e source of compensation to be paid to me is:					
		■ Debtor □ Other (specify):					
5.	-	I have not agreed to share the above-disclosed compensation	with any other person t	unless they are mem	bers and associates of my law firm.		
		I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the					
6.	In	return for the above-disclosed fee, I have agreed to render lega	al service for all aspects	of the bankruptcy	ease, including:		
	a.	[Other provisions as needed] see attached fee agreement					
7.	7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding or any Inquiries into the value of assets.						
		CERT	TIFICATION				
this		ertify that the foregoing is a complete statement of any agreem kruptcy proceeding.	ent or arrangement for	payment to me for r	epresentation of the debtor(s) in		
	Auc	gust 4, 2017	/s/ William T. Cacc	iatore Jr.			
Date William T. Cacciatore Jr. 6244392							
			Signature of Attorney Eric Pratt Law Firm				
			5301 E. State St, S				
Rockford, IL 61108 815-315-0683 Fax: 815-516-5943							
rockford@jordanpratt.com							
			Name of law firm				

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 60 of 67

Document Page 60 of 67
CHAPTER 7 FLAT FEE AGREEMENT Eric Pratt Law Firm, P.C. ("Attorney"), is engaged to represent ("Client"), in a Chapter 7 Bankruptcy. Attorney and Client agree that this representation includes the Petition, Statements appearances, including but not limited to, dischargability complaints, Lien Avoidance, Motion to dismiss filed by US fees will be required if these services are needed.
Client agrees to pay Attorney a flat fee of \$
Client understands that bankruptcy laws only allow for protection of certain amount of property and if any property remains unprotected, Client understands the Chapter 7 Trustee can sell it if Client does not or cannot buy out the Trustee's interest and that the US Trustee may object to the filing of a Chapter 7 if they believe Client has excess income and should be filing a Chapter 13.
Certain debts are not dischargeable under the bankruptcy laws, such as, student loans or educational debts, some taxes, undisclosed debts, debt related to family court matters (support/maintenance), fines, debts incurred by fraud, debts incurred after filing, future association/condo HOA dues, or any other debt found non-dischargeable by the Judge.
Client agrees not to transfer any property or incur any debt without expressed permission from Attorney or the Court. Client agrees to make full disclosure of all income, expenses, debts, and assets at the initial consultation and on the bankruptcy petition.
Client understands bankruptcy law requires the completion of a pre-filing and a post-filing course. Client agrees to pay for both the pre-filing and post-filing course independently of this agreement and working with Attorney to make sure that the certificates are received. If Client's case is closed without discharge by the Bankruptcy Court due to failure to complete post-filing course, Client shall be required to pay fees and cost related to the reopening of the case.
Attorney-Client relationship terminates and the attorney's file will be closed upon receipt of discharge of bankruptcy unless otherwise specified on this document. In the event Client terminates or cancels this Agreement prior to the filing of the bankruptcy Attorney shall deduct the amount of \$300 prior to refunding. Attorney shall promptly refund any amount in excess of \$300. Client authorizes Attorney to transfer any funds held in the trust account to the operating account at the time of such termination to ensure the amounts due and owing to either party can be properly assessed. Any and all physical records will be maintained in accordance with the laws governing such records and will be destroyed no later than 7 years after the file's closure.
By signing this agreement, I agree that I have had an opportunity to discuss the agreement with Attorney, understand the agreement, and have had an opportunity to ask questions and have received an explanation for any questions that I had.
CLIENT ERIC PRATT LAW FIRM, P.C.
Katarzypia Proble Elsent
Total: 1925 + 226 = 2260
If payment via debit card, payments are as follows: \$300 today. Then, \$200 every other Fr.
with no prior authorization necessary. The \$335.00 cannot be debited from the card and shall be paid via check or cash

If payment via cash or check, payments are as follows: \$______today. Then, \$______to be mailed in or dropped off at the office. The \$335.00 filing fee shall be paid prior to filing.

Case 17-81831 Doc 1 Filed 08/04/17 Entered 08/04/17 12:13:48 Desc Main Document Page 61 of 67

United States Bankruptcy Court Northern District of Illinois

In re	Andrew J Poole Katarzyna Poole		Case No.			
	,	Debtor(s)	Chapter 7			
	VERIFICATION OF CREDITOR MATRIX					
		Number of	55			
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	tors is true and cor	rect to the best of my		
Date:	August 4, 2017	/s/ Andrew J Poole Andrew J Poole				
		Signature of Debtor				
Date:	August 4, 2017	/s/ Katarzyna Poole Katarzyna Poole Signature of Debtor				
		Signature of Debtor				

Advance call center Box 9091 Johnson City, TN 37615

Alliance One 4850 Street Rd. Suite 300 Feasterville Trevose, PA 19053

AmeriCredit/GM Financial Po Box 183853 Arlington, TX 76096

Arlington Ridge Pathology 520 E. 22nd St Lombard, IL 60148

ARS National Services Box 469046 Escondido, CA 92046

Avant Credit, Inc 640 N La Salle St Suite 535 Chicago, IL 60654

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130 Citibank North America Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Comenity Bank/Express Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Bank/nwyrk&co 220 W Schrock Rd Westerville, OH 43081

Commerce Bank Attn: KC Rec -10 Po Box 419248 Kansas City, MO 64141

Convergent Outsoucing, Inc Po Box 9004 Renton, WA 98057

Credit adjustments 330 Florence St Defiance, OH 43512

EOS-CCA 700 Longwater Dr. Norwell, MA 02061

Fed Loan Serv Po Box 60610 Harrisburg, PA 17106

Fivenson Dermatology Attn #14626R Box 14000 Belfast, ME 04915

freshview 6300 S. Syracuse Englewood, CO 80111 Great American Finance Attn: Bankruptcy 20 N Wacker Dr. Suite 2275 Chicago, IL 60606

Hsbc Bank Usa, Na Po Box 2013 Buffalo, NY 14240

Joseph Mann & Creed Box 1270 Twinsburg, OH 44087

LAKSHORE GASTROENTEROLOGY PO BOX 14905 Chicago, IL 60614

LDC Collections System PO Box 7684 San Francisco, CA 94120

Lending Club Corp 71 Stevenson St Suite 300 San Francisco, CA 94105

medco financial Box 525 Gurnee, IL 60031

Medical Recovery 2250 E. Devon Ave Suite 352 Des Plaines, IL 60018

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

meyer & njus 1100 US Bank Plaza 200 South Sixth St Minneapolis, MN 55402 Midwest Recovery Syste Po Box 899 Florissant, MO 63032

Miramed Revenue Group 991 Oak Creek Dr Lombard, IL 60148

Monterey Financial Svc 4095 Avenida De La Plata Oceanside, CA 92056

municipal Services Box 16755 Austin, TX 78761

Mutual Management Serv 7177 Crimson Ridge Dr St Rockford, IL 61107

Navient Attn: Claims Dept Po Box 9500 Wilkes- Barr, PA 18773

NCC Business Services Box 24739 Jacksonville, FL 32241

NES of Ohio 2479 Erdison Blvd Unit A Twinsburg, OH 44087

Northwest Suburban Physicians 5999 New Wilke Rd Suite 200 Bldg 2 Rolling Meadows, IL 60008

NTB/CBSD CitiCards Private Label Centralized Bank Po Box 790040 Saint Louis, MO 63179 OneMain Attn: Bankruptcy 601 Nw 2nd St Evansville, IN 47708

parkside obstetrics 1875 Dempster St Suite 465 Park Ridge, IL 60068

Pnc Bank 2730 Liberty Ave Pittsburgh, PA 15222

procressive ins Dept 0586 Carol Stream, IL 60132

promedica Attn # 11043 BOx 14000 Belfast, ME 04915

Receivables Outsouring Box 62850 Baltimore, MD 21264

RMCB Box 1235 Elmsford, NY 10523

State Collections Box 6250 Madison, WI 53716

Synchrony Bank/ JC Penneys Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Synchrony Bank/TJX Attn: Bankruptcy Po Box 956060 Orlando, FL 32896 The Toledo Clinic Box 8708 Toledo, OH 43623

Uas/college Ave Studen 1105 N Market St Wilmington, DE 19801

University of Wis Med Foundation Box 2978 Milwaukee, WI 53201

university of Ws Box 3006 Milwaukee, WI 53201

Wells Fargo Hm Mortgag Po Box 10335 Des Moines, IA 50306